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Re: WC Docket Nos. 17–287, 11–42, 09–197; FCC 17–155

On behalf of EmblemHealth, we appreciate this opportunity to respond to issues raised by the Federal Communication Commission (FCC) in the Fourth Report and Order, Order on Reconsideration, Memorandum Opinion and Order, Notice of Proposed Rulemaking, and Notice of Inquiry entitled “Bridging the Digital Divide for Low-Income Consumers; Lifeline and Link Up Reform and Modernization; Telecommunications Carriers Eligible for Universal Support” posted on December 1, 2017 and published in the *Federal Register* on January 16, 2018 (83 FR 2104). EmblemHealth is the largest community-based nonprofit health plan in the country. The proposed rule is of critical importance to the more than 140,000 Medicaid beneficiaries we serve in New York State who have come to rely on our innovative approach to providing high quality health care services.

EmblemHealth is one of many health plans that depends upon the Lifeline program to ensure our enrollees receive the care they need. The program provides financial assistance to low-income individuals to purchase data plans they are otherwise unable to afford. In turn, EmblemHealth can communicate important information by text that allows our enrollees to take best advantage of the services we offer. For example, health plans commonly use text to remind beneficiaries of upcoming medical appointments or to refill their prescriptions, and describe proactive steps they can take to improve their overall health and well-being. Studies demonstrate these text-based programs improve care for low-income individuals. For example, recent analyses have found health plan-base texting programs for low-income pregnant women reduce alcohol and tobacco use¹ and lower blood sugar levels for with diabetes.² These programs are also reducing costs for beneficiaries and payers, including one study finding a text messaging program focusing on diabetes management achieved savings of \$812 per participant over a six month period.³

We are concerned that aspects of the proposed rule could jeopardize our ability to continue providing these vital services to our enrollees. At paragraph 16⁴, the FCC is proposing to

¹ Evans, W. D., Wallace, J. L., & Snider, J. (2012). Pilot Evaluation of the Text4baby Mobile Health Program. BMC public health, 12(1), 1031. Available: <http://www.biomedcentral.com/1471-2458/12/1031>

² Grabosch, S., Gavard, J. A., & Mostello, D. (2014). 151: Text4baby Improves Glycemic Control In Pregnant Women with Diabetes. American Journal of Obstetrics and Gynecology, (210)1:88. Available at: [http://www.ajog.org/article/S0002-9378\(13\)01249-0/pdf](http://www.ajog.org/article/S0002-9378(13)01249-0/pdf)

³ Nundy, S. Dick, J., Chia-Hung, C., Nocon, R., Chin, M., Peek, M. Mobile Phone Diabetes Project Led To Improved Glycemic Control And Net Savings For Chicago Plan Participants. Health Affairs. February 2014 33:2265-272; doi:10.1377/hlthaff.2013.0589. Found at <http://content.healthaffairs.org/content/33/2/265.full>

⁴ Paragraph references are to the Federal Register version of the proposed rule.

discontinue Lifeline support for non-facilities based service providers. **We strongly urge the Commission to reverse this proposal.** EmblemHealth engages in a competitive procurement process to choose our service provider for the data plans used by individuals receiving assistance from Lifeline. Reducing the number of competitors would limit our choices and hamstring the marketplace process that drives innovations from prospective vendors in this rapidly changing industry. Limiting the number of providers will also increase contracting costs, which could result in fewer health plans using text-based programs to improve the health and well-being of the individuals receiving assistance from the program.

The FCC's primary reason for putting forward this proposal is to limit fraud, waste, and abuse, which according to the proposed rule is more prevalent among non-facilities based providers. We support this goal. The proposed rule at paragraph 22 indicates the Commission is considering new requirements that would penalize non-compliant vendors. We strongly suggest the Commission work with interested parties to establish these standards as an alternative to eliminating support for facilities-based providers. Doing so is consistent with Medicaid, Medicare, and other public programs that have developed anti-fraud and abuse requirements to identify bad actors without reducing beneficiary access to individuals and organizations that follow the rules.

We appreciate this opportunity to respond to this proposed rule. Please contact Howard Weiss at 646-447-1074 or hweiss@EmblemHealth.com if you would like to discuss the issues we have raised.